UNITED
NATIONS

S

Security Council

Distr.
GENERAL

S/22758
3 July 1991
ENGLISH
ORIGINAL: ARABIC

LETTER DATED 3 JULY 1991 FROM THE PERMANENT REPRESENTATIVE OF IRAQ TO THE UNITED NATIONS ADDRESSED TO THE SECRETARY-GENERAL

On instructions from my Government, I have the honour to transmit herewith a report dated 27 June 1991 from the organization Medicine for Peace concerning the serious impact of economic sanctions on Iraq and its health care system.

I should be grateful if you would have this letter and its annexes circulated as a document of the Security Council.

(Signed) Abdul Amir A. AL-ANBARI
Ambassador
Permanent Representative

[Original: English]

Annex I

MFP
MEDICINE FOR PEACE
MEDICINA POR LA PAZ

NEWS RELEASE

FOR IMMEDIATE RELEASE
JUNE 27, 1991

MICHAEL V. VIOLA, M.D.
REV. GERALD S. TWOMEY
CO-DIRECTORS

MEDICAL CARE SYSTEM IN IRAQ IN IMMINENT DANGER OF COLLAPSE

MFP TEAM URGES LIFTING OF MEDICAL EMBARGO

A medical delegation of academic physicians, sponsored by Medicine for Peace (MFP), has recently visited Iraq and has completed a comprehensive evaluation of a number of hospitals in the center and outskirts of Bagdhad. The team spent one week assessing the present condition of the health care system through discussions with the Deputy Minister of Health, Ministry officials, representatives of non-governmental humanitarian organizations based in rural areas of Iraq, and with a large number of Iraqi physicians. Most importantly, the team examined hundreds of hospitalized children, reviewed methods used for diagnosis and treatment, and evaluated the ability of the Iraqi medical system to care for critically ill children.

The MFP report, which will be released on June 27, 1991, includes the following conclusions and recommendations:

1. Severe malnutrition and chronic diarrhea in children under five has reached epidemic proportions and represents the single most critical health care problem in post-war Iraq.

2. The previously documented outbreak of infectious diseases (typhoid fever, viral hepatitis, meningitis, tetanus, cholera, and poliomyelitis) resulting from destruction of the sanitation system, has worsened during the months of May and June.

3. There are critical shortages of vital medicines including antibiotics, vaccines, and infant formulas. The functioning of hospitals is severely impaired because of shortages of spare parts and lubrication oil for diagnostic and therapeutic instruments, refrigeration units and air condition systems. These shortages have paralyzed the hospital health care system and the best hospitals in Iraq are barely functioning.

4. The net effect of the sanctions imposed by United Nations resolution 662 has been a functional embargo of medicine and supplies

15 RICHARD WOOD ROAD • PEACHTREE, NEW YORK 11733 USA
TEL. (516) 689-7062 • FAX (516) 444-3506

/...

4. The net effect of the sanctions imposed by United Nations resolution 662 has been a functional embargo of medicine and supplies necessary to sustain the lives of hundreds of thousands of children over the next year.

In summary, the Gulf War has resulted in epidemic levels of potentially curable childhood diseases. The inability to obtain the necessary medicines to treat these diseases and the absence of resources to sustain hospitals, outpatient facilities and pharmacies is likely to result in the collapse in the Iraqi health care system within the next few months.

The MFP team strongly urges modifying the embargo imposed by UN resolution 662 to allow the Iraqi Ministry of Health to obtain the medicine and supplies it desperately needs.

Medicine for Peace is a Long Island/New York based humanitarian organization concerned with health care problems of people in need. Members of the team includes Dr. Michael Viola, Professor of Medicine and Microbiology, State University of New York at Stony Brook and co-director of MFP; Dr. Lewis Marshall, an infectious disease specialist from Howard University and Providence Hospital in Washington, D.C., and head of the Washington, D.C. office of MFP; Dr. William LiPara, an internist at University Hospital and the State University of New York at Stony Brook; Daniel Loughran, a broadcast communications educator from B.O.C.E.S III on Long Island, and Akram Abmatr, an Arabic interpreter from Amman, Jordan.

The MFP team in Iraq produced a film, "After the Storm," documenting the plight if Iraqi children. For further information, please contact Dr. Michael Viola, 516-444-1727 in New York, or Dr. Lewis Marshall, 202-479-2873 in Washington, D.C.

/...

[Original: English]

Annex IX

The Dying Babies of Baghdad

If he is still alive today, Dawood lies awake at the Saddam City Hospital for Pediatrics in an oversized bed that makes his body seem to disappear. He is a small bundle in the middle of it, motionless in a tangle of tubes. He is 6 months old.

The temperature in his room — depending on the weather in Baghdad today — is between 100 and 110 degrees.

Dawood is hospitalized for malnutrition and dehydration; but as fast as the intravenous tubes put liquid into his body, the heat in the air takes it out again.

His mother sits beside him, fanning him with a manila X-ray envelope.

Paul Vitello

Doctors from Stony Brook University Hospital visited Dawood last week during a fact-finding tour of four pediatric hospitals in Baghdad. They were sponsored in their trip by a Long Island-based organization called Medicine for Peace. They brought their own translator and they were given freedom of movement in Baghdad.

What they saw in Baghdad was a relatively normal city life of traffic and commerce, with empty spaces where there used to be some buildings.

What they saw in the children's hospitals was hell on earth.

Last month, a Harvard-based group of medical professionals returned from a visit to Iraq and reported that the war and its aftermath had resulted in a "public health catastrophe." They said the breakdown of the medical system could cause as many as 170,000 Iraqi children to die.

The Stony Brook group has made no prediction of how many will die in the future. Their report, due to be released next week, describes instead the causes and the manner in which the children of Iraq are dying every day.

They found that the children are dying by the hundreds, dying painfully, and dying needlessly: from typhoid, hepatitis, tetanus, cholera, meningitis, malnutrition — all of which are curable.

They are dying for lack of drugs and other medical equipment that no human should be denied, but which the U.S. policy to force Saddam Hussein from power has conspired to deny them.

"I'm director of the Cancer Center at Stony Brook. I've seen a great deal of suffering . . . but I've never seen anything quite like this," said Dr. and a professor of medicine and microbiology at the university medical school.

He was accompanied on the four-day trip by Dr. William LiPera, an oncologist and internist at University Hospital; Dr. Lewis Marshall, an infectious disease specialist from Howard University in Washington, and Daniel Loughran, a local filmmaker.

The group is seeking changes in the United Nations embargo — and, more important, in the unwritten policies of the allies in their effort to undermine the stability of Iraqi society, in hopes of ridding it of Saddam — to allow Iraq the medical supplies it needs.

"What we saw was like the third circle of hell," said LiPera.

In each hospital, the first impression was always the same: oppressively hot wards filled with children whose parents could do nothing for them but fan.

Sanctions imposed against Iraq by the United Nations specifically exempt medical supplies from being embargoed. But in effect, said Viola, infant formula, drugs and other medical supplies are not getting in.

There are no vaccines available. There is no insulin for children with diabetes. Antibiotics are running short. Syringes and needles are re-used 20 and 30 times, and this in a country where hepatitis is already rampant.

There are no spinal needles to be had.

The actual UN embargo against the import of spare machinery parts and lubricating oil has had an equally devastating, if unintended, effect on the medical system.

For lack of lubricating oil, hospitals cannot operate ventilators, respirators and X-ray machines. For lack of spare parts, air conditioning and refrigeration systems are breaking down.

"There is no laboratory work being done. Doctors are making diagnoses the way it was done in the 1930s and '40s," Viola said.

"I've just never seen so many children suffering and dying of potentially curable diseases . . . It's absolutely heartbreaking."

Dawood's mother told Viola that she could only get infant formula on the black market, and then only at prices she could not afford: 18 dinars for a three-day supply, when her husband only made about 20 dinars a week.

When Dawood was last released from the hospital — just a month ago — she received a free, one-week's supply of formula. She tried to stretch this by diluting it, and now Dawood is suffering worse malnutrition than before, and a blood infection from which he was not expected to recover.

There were five or six other children in the same condition as Dawood on his ward.

In another hospital, Dr. LiPera encountered a 4-year-old girl with leukemia whose illness had been in remission until just recently, when the hospital ran out of its supply of chemotherapy drugs. Her most recent blood tests showed a return of the leukemia.

In some wards, children with disfiguring tumors went without treatment of any kind.

Most painful perhaps for the doctors was the plight of an Iraqi doctor whose own daughter suffered a congenital heart condition which, in better circumstances, would probably have been correctable, but which was likely to cost her her life in post-war Iraq.

"The doctor was frantic, he was in a sheer panic," said Viola. The child was blue. Her mother held her in her arms.

Viola asked the doctor what kind of condition his daughter had. The doctor did not know because dyes used in testing heart-valve disorders were embargoed. Viola asked why they did not then operate on the child directly. The father said heart surgery couldn't be performed without a respirator. Viola asked why they didn't take the child to Jordan. The doctor said inflation of the Iraqi currency made this unaffordable.

The doctor, like the other parents in all the wards they visited, was helpless.

Iraqi government officials told members of the group that since the end of the war the major pharmaceutical manufacturers worldwide have insisted on cash payments for drugs and medical supplies; and that because so much of the nation's assets are in frozen foreign accounts, the import of drugs has stopped.

Contacted by Newsday on Friday, spokesmen for the Pharmaceutical Manufacturers Association and several large drug companies said they were unable to discuss the alleged policy, though the PMA spokesman said that if it existed, it would be "an accounting decision, basically, made by the credit managers of the individual companies."

Dawood's mother sat stoically by his bedside, fanning the air with her envelope and keeping the flies from his face. Dawood, on the horrible sheets

[Original: English]

Annex III

U.N. sanctions: 'Silent disaster' for the children

By Lee Michael Katz
USA TODAY

The Security Council should consider easing tough United Nations sanctions to prevent a "silent disaster" brewing among stricken Iraqi civilians, the U.N. high commissioner for refugees said Wednesday.

A new report adds impact to a Harvard study that says 170,000 Iraqi children could die within a year as a result of sanctions and war-related causes in what U.N. High Commissioner Sadako Ogata called "a quiet, deteriorating emergency."

Ogata said in an interview that a U.N. inspection team will review Iraq's health, water and sanitation problems.

The sanctions — supported by the United States and allies to squeeze Saddam Hussein out of power — haven't crippled the Iraqi leader, Ogata said.

"What seems to have happened right now is the leader (Saddam) does not seem to have been punished, but the people have taken a very heavy toll," she said.

Adding fuel to Ogata's comments: an Iraq inspection report, to be released today by a New York humanitarian group, Medicine for Peace.

"The problem's horrible," the group's Michael Viola said. "Hospitals are collapsing." Viola described hospital wards where room temperatures reach 110 degrees, and hospitals without working laboratories or medicine. "We saw kids . . . essentially just dying in front of our eyes," Viola said. "We saw a lot of kids who were terminal from diseases that were easily cured if sanctions were not in place."

By Ron Edmonds, AP

OVAL OFFICE TALKS: U.N. High Commissioner Sadako Ogata, of Japan, met with President Bush Monday to discuss the status of Iraqi civilians.

Although food and medicine are exempt from the U.N. embargo, Viola said, frozen Iraqi assets and blocked shipments have made infant formulas and medicine unavailable. "All the malnutrition is because of the embargo," Viola said. "It looks like Bangladesh or Ethiopia."

Although Iraq had gained some U.N. sympathy to relax sanctions, Saddam's apparent chicanery in hiding his nuclear facilities is likely to further opposition.

Saying she did not want to "pass judgment" on the sanctions, Ogata diplomatically seconded the call for allowing some Iraqi oil exports to pay for food and medicine. "It depends on how it's lifted," Ogata said, suggesting sanctions "may be eased in proportion."

"Then make sure that the part that has been lifted would be sent directly to the vulnerable people — children and babies and hospitals," Ogata said.

▶ Iraq warned, 1A